

Application # \_\_\_\_\_

\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

Owner's Name: Micah Killgore		Date 12/20/24
Site Address: 183 Bering Circle Angier, NC 27501	Phone	919 771 8842
Subdivision: Riverfall  Description of Proposed Work: roof mount solar PV consisting of 24 modules	_ Total Job Cost	\$31,400.00
General Contractor Information		
Southern Energy Management- Daniel Conner	919 244 0238	
Building Contractor's Company Name	Telephone	
5908 Triangle Drive, Raleigh NC 27617	solaradmin@s	southern-energy.com
Address	Email Address	
U.69072 HEATED SQ FT GARAGE SQ	FT	
License #		
Description of Work installation of roof mount solar PV system- 24 module Service Size: 2	<u>l</u> 200 Ambs T.F	Polo: Voc v No
Southern Energy Management- Nathan Jones	919 244 0238	
Electrical Contractor's Company Name	Telephone	
5908 Triangle Drive, Raleigh NC 27617	•	southern-energy.com
Address	Email Address	
U.31374	Liliali Addiess	
License #		
Mechanical/HVAC Contractor Information	ation_	
Description of Work		
		•
Mechanical Contractor's Company Name	Telephone	
• •	·	
Address	Email Address	
License #		
Plumbing Contractor Information	<u>1</u>	
Description of Work	# Baths	
Plumbing Contractor's Company Name	Telephone	
Address	Email Address	
License #	_	
Insulation Contractor Information	<u>1</u>	
Insulation Contractor's Company Name & Address	Telephone	
mouation contractors company rightly & Audition	I GIGDLIOLIG	

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

**EXPIRED PERMIT FEES** - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Morgan Bragg Signature of Owner/Contractor/Officer(s) of Corporation	12/20/2024		
Signature of Owner/Contractor/Officer(s) of Corporation	Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:			
General Contractor Owner X Office	er/Agent of the Contractor or Owner		
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:			
X Has three (3) or more employees and has obtained workers' compensation insurance to cover them.			
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.			
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.			
Has no more than two (2) employees and no subcontractors.			
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.			
Sign w/Title: Morgan Bragg Solar Pro	ject Manager Date: 12/20/204		